

**KANSAS DEPARTMENT OF AGRICULTURE  
KARNAL BUNT SEED TEST**

**Include payment of \$50 for each sample submitted**

Temp ID# \_\_\_\_\_

Suppl  
ied by  
the  
Collector

Lab Sample ID

KAPPRIS Sample Number \_\_\_\_\_

**For Official Use Only**

Collection Date: \_\_\_\_\_

Counties where wheat was grown: \_\_\_\_\_

**SITE INFORMATION**

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

ZIP: \_\_\_\_\_

**SITUATION** circle one

Research/experiment facility (ES)

SEED Company (SE)

FARM Seed (GF)

**COMMODITY SAMPLED** circle one

Wheat (WHT)

Durum (DUR)

Triticale (TRI)

**SEED TYPE** circle one

Commercial

Private

Research

SAMPLE TYPE

Single

Composite

Complete the Component ID (bin#, lot#, etc.)  
Circle One

COMPONENT ID, ASSIGNED BY THE COLLECTOR - \*\* No more than 10 components per sample.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

I \_\_\_\_\_ hereby attest that the submitted sample was collected by the protocol as found on the back of this form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

===== **OFFICIAL LABORATORY USE ONLY** =====

Date Received: \_\_\_\_\_

Date Processed: \_\_\_\_\_

Organism- Tilletia indica (KBT)

Identifier: \_\_\_\_\_

Results: Negative Positive  
Circle One

Confirmation Method = Sieve Selection-Light Microscope (LM)

Comments: \_\_\_\_\_

Ship Samples To: Plant Pest Diagnostic Clinic, Kansas Department of Agriculture, Bldg. 282, Forbes Field, PO Box 19282, Topeka, KS 66619, Phone: (785) 862-2180

**Please use a package delivery company to ship samples. The US Postal Service does not deliver to our location.**